IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

AETNA LIFE INSURANCE COMPANY*

*

Plaintiff

*

V. *

No. 3:14-CV-00347-M

METHODIST HOSPITALS OF DALLAS * et al. *

*

Defendants *

DECLARATION OF WILLIAM J. MAIBERGER, JR.

- I, William J. Maiberger, Jr., do hereby declare and state under oath as follows:
- 1. "My name is William J. Maiberger, Jr. All of the factual statements in this declaration are personally known to me and are true and correct.
 - 2. "I am over the age of 18 and am competent to make this declaration.
- 3. "I am a partner in Watts Guerra, LLP. In that capacity, I am an attorney for the Defendants in Cause No. 3:14-CV-00347-M.
- 4. "Attached to this declaration as Exhibit A are true and correct copies of excerpts of the transcript of the October 10, 2014 deposition of David Roberts.
- 5. "Attached to this declaration as Exhibit B are true and correct copies of excerpts of the transcript of the October 10, 2014 deposition of Robyn Consiglio.
- 6. "Attached to this declaration as Exhibit C are true and correct copies of Explanations of Benefits provided by Aetna to the providers who are the

Defendants in this matter. Where necessary, private health information

concerning the individuals whose medical treatment is described in those

documents has been redacted.

7. "Attached to this declaration as Exhibit D is a true and correct copy

of the Original Answer of Aetna Health, Inc. in Cause No. 17-269305-13, Texas

Health Resources v. Aetna Health, Inc., filed on December 13, 2013 in the 17th

Judicial District Court of Tarrant County, Texas. The claims at issue in that

lawsuit include claims seeking the recovery of statutory penalties contemplated

by Chapter 1301 of the Texas Insurance Code; specifically, those claims seek

recovery of the penalties for late payment of adjudicated claims for the provision

of health care services allowed by Section 1301.137 of the Insurance Code.

Despite the presence of those claims in the Tarrant County action, Aetna Health's

original answer includes only a general denial of the claims made by Texas

Health Resources and does not include any contention of a defect in the parties.

8. "I declare under the penalty of perjury that the foregoing is true and

correct."

Executed on December 18, 2014

William J. Maiberger, Jr.

NO.	17-269305-13
TEXAS HEALTH RESOURCES,) IN THE DISTRICT COURT
)
Plaintiff)
)
VS.) 17TH JUDICIAL DISTRICT
)
AETNA HEALTH, INC.,)
)
Defendant) TARRANT COUNTY, TEXAS

ORAL AND VIDEOTAPED DEPOSITION OF DAVID ROBERTS OCTOBER 10, 2014 Volume 1

ORAL AND VIDEOTAPED DEPOSITION OF DAVID ROBERTS, produced as a witness at the instance of the PLAINTIFF, and duly sworn, was taken in the above-styled and numbered cause on OCTOBER 10, 2014, from 9:46 a.m. to 11:08 a.m., before STEFANIE COX, CSR in and for the State of Texas, reported by machine shorthand, at the law offices of Andrews Kurth, L.L.P., 1717 Main Street, Suite 3700, Dallas, Texas 75201, pursuant to the Texas Rules of Civil Procedure and the provisions stated on the record or attached hereto.

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EXHIBIT-000003

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document that covers both or one or the other, you're just not 100 percent sure as you sit here right now? Α. Correct. Is that fair? 0. Α. Fair. Okay. Now, as far as -- let's just talk about 0. PPO claims first. As far as PPO claims are concerned, when THR submits a PPO claim to Aetna Health, Inc., pursuant to that -- pursuant to whatever contract it is that we have in this case that allows that to happen, let's just assume for the purposes of our discussion that Exhibit 1 is the contract that allows that. Okay? Α. Okay. And I'm not saying that it is. I'm just Q. saying just so we can have something to refer to. That is THR submitting claims for payment to Aetna Health, Inc., correct? MR. REID: Objection to form. I think the -- the answer to that is there --Α. the contract is with Aetna Health, Inc., and its affiliates. And in claim submission, we may ask a provider to submit claims to various pay points, which would be Aetna Health, Inc., and others. Okay. Let me ask you this way: So Aetna Q.

1 Health, Inc., though, is the legal entity that my client 2 has a contract with, correct? 3 A. Correct. Correct. 4 Okay. So if when you say "we may ask a Q. 5 provider, " so I think what you're saying is we being 6 Aetna Health, Inc., because that's the entity that my 7 client is contracted with, may ask my client, THR, to 8 submit claims to a different entity --9 Different Aetna entity. Α. 10 -- different Aetna entity pursuant to the Q. 11 contract between THR and Aetna Health, Inc.? 12 Α. Yes. 13 Okay. And I would imagine that in those Q. 14 situations, providers like my client, THR, would comply 15 with that request? 16 Α. Yes. 17 Q. Okay. Now, in this situation, THR and Aetna 18 Health, Inc., had this contract that we've been talking 19 about. 20 Does Aetna Health, Inc., have a contract 21 or contracts with another Aetna entity that obligates 22 that other Aetna entity to process these PPO claims and 23 pay them? 24 MR. REID: Objection. I'm not sure I understand the question. 25 Α.

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(BY MR. MAIBERGER) Okay. Let me ask you this Q. way: My understanding is -- and I could be wrong, too. But my understanding is that for either PPO or HMO claims, I'm not sure which one, that Aetna Life Insurance Company is actually the entity that processes and, you know, decides how much is going to get paid and when it gets paid and actually pays the claims. Is that -- is that true for either PPO claims or HMO claims or both as it pertains to THR? MR. REID: Objection, form. Aetna Health, Inc., is a legal entity that sells HMO based products. Aetna life is a PPO based product --0. Okay. -- and sells products under that license, but both of which would be covered under this contract. Okay. So the contract between THR and Aetna Health, Inc., whatever claims are submitted by my client, THR, are submitted to Aetna Health, Inc., pursuant to that contract, right? Α. Correct. Okay. And then on the P- -- in the PPO Q. setting, Aetna Health, Inc., has some sort of an agreement with Aetna Life Insurance Company for Aetna Life Insurance Company to process those PPO claims, you

1 know, determine how much is going to get paid and when 2 it gets paid, then does Aetna Health -- excuse me. 3 me start over. That was -- I messed myself up there. 4 Just in the PPO setting, my client, THR, 5 has a contract with Aetna Health, Inc., and it submits 6 claims for payment to Aetna Health, Inc., pursuant to 7 that contract, right? 8 Right. Α. 9 And Aetna Health, Inc., has some sort Q. 10 of an agreement with Aetna Life Insurance Company for 11 Aetna Life Insurance Company to perform some type of 12 work or services pursuant to those claims, right? 13 MR. REID: Objection to the form. 14 Α. The -- though I may have confused the Yes. 15 But while there are two legal entities in which 16 we operate, much of the administration is housed in one 17 location, meaning that a person would potentially pay an 18 HMO claim and a PPO claim in that same department. 19 Let me -- let me go -- let me go the other way Q. 20 and see if we can back into it this way. 21 When -- when my client, THR, gets paid on 22 a PPO claim, does the payment come from Aetna Health, 23 Inc., or from Aetna Life Insurance Company, or from --24 from some other entity? 25 Α. I don't know.

1	Q. Okay. When my client gets paid on a on an
2	HMO claim, does that payment come from Aetna Health,
3	Inc., Aetna Life Insurance Company, or from some other
4	entity?
5	A. It would be Aetna Health.
6	Q. Okay. So in the HMO setting, you know that
7	Aetna Health, Inc., is the company or is the entity
8	that's making the payment to my client?
9	A. Right.
10	Q. But in the PPO setting, you're not sure if
11	it's Aetna Health, Inc., or Aetna Life Insurance
12	Company, or some other legal entity?
13	A. It would be on EOBs, but I don't look at those
14	often enough to know that answer.
15	Q. No. That's fine.
16	And as you I'm just saying, as you sit
17	here, you just don't know for sure?
18	A. Right.
19	Q. Are you pretty confident that it would either
20	be, again, in the PPO setting the payment would come
21	from either Aetna Health, Inc., or Aetna Life Insurance
22	Company?
23	MR. REID: Objection to form.
24	A. Yes.
25	Q. (BY MR. MAIBERGER) Okay. Okay. So I think

why I'm thinking that these questions were something that you would be here to testify about today. But if you're not, that's fine, too. Just tell me. I'm not trying to make you guess anything or, you know, tell me something you don't know.

A. I did not -- I don't have the knowledge of how the inner workings of these two companies work together. I understand the contractual component and what's expected from a claim submission standpoint and that payment is due from Aetna. Whether that is from Aetna Health or one of its other subsidiaries, I don't have all that legal connection in my head in terms of how those EOBs may have Aetna labels on them coming back to THR in this case.

In other words, does it say Aetna Health in one case and Aetna Life Insurance in another or Aetna something else in other scenarios, I don't have that level of detail.

- Q. Okay.
- A. Robyn may have that.
- Q. Okay. That's fine. That's -- that's -- that's as good of an answer as -- you know, as if you did know. I just want to know what you know and what you don't know.

So one thing I think that we have

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established though is that whether it's an HMO claim or PPO claim that my client, THR, when it submits a claim, it's being submitted to Aetna Health, Inc., pursuant to the contract that we've been talking about, right? A. Right. Okay. And then the HMO, I think we've pretty Q. much taken care of that. I think that's clear. But as far as the PPO is concerned, that's where you're not -- you're not completely familiar with all of the workings between, for example, Aetna Health, Inc., and Aetna Life Insurance Company, and possibly some other Aetna entity, right? Α. Correct. Q. Okay. Now, let me ask you this, and, again, this may be something that you may need to defer to somebody else on: But are you aware of there being any direct contractual relationship between my client, THR, and any other Aetna entity besides Aetna Health, Inc.? MR. REID: Objection to form. You can answer if you know. I don't know for sure. I would suspect that Α. there are contracts between Texas Health Resources and our Medicaid business operation and there may be others. Q. (BY MR. MAIBERGER) Okay. Let me see if I can limit that question. That was kind of a broad question.

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Are you aware of there being any direct contractual relationship between THR and any other Aetna entity besides Aetna Health, Inc., for the submission of claims for payment for services performed by THR like the ones we've been talking about that are submitted pursuant to Exhibit No. 1? I'm not aware that there are any contracts outside of this for commercial business. Okay. For commercial business, that's a good Q. way to put it. So for commercial business, you're not aware of there being any contracts between THR and some other Aetna entity besides Aetna Health, Inc., which is the contract we have here in front of us, right? I'm going through these exceptions in my head to try to answer as best I can. The only question that comes to my mind is whether there is a -- an agreement between THR and the behavioral health arm of Aetna, but I don't know that for sure. 0. Okay. When you -- let me just ask you about that just a little bit. Behavioral health arm of Aetna, what -would there be claims that could be submitted by THR to Aetna for those types of -- or that type of treatment? Α. I'll answer more generally.

NO. 17-269305-13
TEXAS HEALTH RESOURCES,) IN THE DISTRICT COURT
)
Plaintiff)
)
VS.) 17TH JUDICIAL DISTRICT
)
AETNA HEALTH, INC.,)
)
Defendant) TARRANT COUNTY, TEXAS
REPORTER'S CERTIFICATION
VIDEOTAPED DEPOSITION OF DAVID ROBERTS
OCTOBER 10, 2014
I, STEFANIE COX, Certified Shorthand Reporter in
and for the State of Texas, hereby certify to the
following:
That the witness, DAVID ROBERTS, was duly sworn by
the officer and that the transcript of the videotaped
oral deposition is a true record of the testimony given
by the witness;
That the deposition transcript was submitted on
to the attorney for Defendant,
Mr. Mitch Reid, Andrews Kurth, L.L.P., 1717 Main Street,
Suite 3700, Dallas, Texas 75201, for examination,
signature and return to me by;
That the amount of time used by each party at the
deposition is as follows:

1 Mr. William J. Maiberger, Jr. - 01 HOURS:11 MINUTE(S) 2 Mr. Mitch A. Reid - 00 HOURS:00 MINUTE(S) 3 That pursuant to information given to the 4 deposition officer at the time said testimony was taken, 5 the following includes counsel for all parties of record: 6 7 Mr. William J. Maiberger, Jr., Attorney for Plaintiff; 8 Mr. Mitch A. Reid, Attorney for Defendant. 9 I further certify that I am neither counsel for, 10 related to, nor employed by any of the parties or 11 attorneys in the action in which this proceeding was 12 taken, and further that I am not financially or 13 otherwise interested in the outcome of the action. 14 Further certification requirements pursuant to Rule 15 203 of TRCP will be certified to after they have 16 occurred. 17 Certified to by me this 20th of October, 2014. 18 19 20 STEFANIE COX, Texas CSR 5384 21 Expiration Date: 12/31/15 22 Firm Registration No. 235 WORLDWIDE COURT REPORTERS, INC. 23 3000 Weslayan Suite 235 2.4 Houston, Texas 77027 (713) 572-2000 25

NO.	17-269305-13	
TEXAS HEALTH RESOURCES,) IN THE DISTRICT COURT	
)	
Plaintiff)	
)	
VS.) 17TH JUDICIAL DISTRICT	Г
)	
AETNA HEALTH, INC.,)	
)	
Defendant) TARRANT COUNTY, TEXAS	

ORAL AND VIDEOTAPED DEPOSITION OF
ROBYN CONSIGLIO
OCTOBER 10, 2014
Volume 1

ORAL AND VIDEOTAPED DEPOSITION OF ROBYN CONSIGLIO, produced as a witness at the instance of the PLAINTIFF, and duly sworn, was taken in the above-styled and numbered cause on OCTOBER 10, 2014, from 11:24 a.m. to 12:30 p.m., before STEFANIE COX, CSR in and for the State of Texas, reported by machine shorthand, at the law offices of Andrews Kurth, L.L.P., 1717 Main Street, Suite 3700, Dallas, Texas 75201, pursuant to the Texas Rules of Civil Procedure and the provisions stated on the record or attached hereto.

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EXHIBIT

1 Pay Act discussion off the table for a moment. 2 But as far as the actual processing of the 3 claims is concerned, does Aetna process -- and I think I 4 may have asked you this. I just want to make sure. 5 Has Aetna -- does Aetna process the claims 6 the same way whether it's a fully insured claim or a 7 self-funded claim? 8 MR. REID: Objection to form. 9 Α. To my knowledge, yes. 10 (BY MR. MAIBERGER) Okay. With regard to the Q. 11 PPO claims that -- that I talked about, the examples I 12 gave, some of the examples I gave with Mr. Roberts, are 13 you aware of where the payment comes from on a PPO claim 14 submitted by a provider to Aetna? 15 Does it -- does it come from Aetna Health, 16 Inc., or does it come from Aetna Life Insurance Company, 17 or does it just come from Aetna, as far as you -- as far 18 as you know? 19 As far as I know, it just comes from Aetna A. 20 Life Insurance Company. I do know that it will specify 21 on explanation of benefits that it -- it lists the 22 company name. 23 Whatever entity that the money is coming from? Q. 24 Α. Yes. 25 Q. Okay. Is there a name for the system that the

1	NO. 17-269305-13
2	TEXAS HEALTH RESOURCES,) IN THE DISTRICT COURT
)
3	Plaintiff)
)
4	VS.) 17TH JUDICIAL DISTRICT
)
5	AETNA HEALTH, INC.,
)
6	Defendant) TARRANT COUNTY, TEXAS
7	
8	REPORTER'S CERTIFICATION
9	VIDEOTAPED DEPOSITION OF ROBYN CONSIGLIO
10	OCTOBER 10, 2014
11	
12	I, STEFANIE COX, Certified Shorthand Reporter in
13	and for the State of Texas, hereby certify to the
14	following:
15	That the witness, ROBYN CONSIGLIO, was duly sworn
16	by the officer and that the transcript of the videotaped
17	oral deposition is a true record of the testimony given
18	by the witness;
19	That the deposition transcript was submitted on
20	to the attorney for Defendant,
21	Mr. Mitch Reid, Andrews Kurth, L.L.P., 1717 Main Street,
22	Suite 3700, Dallas, Texas 75201, for examination,
23	signature and return to me by;
24	That the amount of time used by each party at the
25	deposition is as follows:

1 Mr. William J. Maiberger, Jr. - 00 HOURS:45 MINUTE(S) 2 Mr. Mitch A. Reid - 00 HOURS:00 MINUTE(S) 3 That pursuant to information given to the 4 deposition officer at the time said testimony was taken, 5 the following includes counsel for all parties of record: 6 7 Mr. William J. Maiberger, Jr., Attorney for Plaintiff; 8 Mr. Mitch A. Reid, Attorney for Defendant. 9 I further certify that I am neither counsel for, 10 related to, nor employed by any of the parties or 11 attorneys in the action in which this proceeding was 12 taken, and further that I am not financially or 13 otherwise interested in the outcome of the action. 14 Further certification requirements pursuant to Rule 15 203 of TRCP will be certified to after they have 16 occurred. 17 Certified to by me this 20th of October, 2014. 18 19 20 STEFANIE COX, Texas CSR 5384 21 Expiration Date: 12/31/15 22 Firm Registration No. 235 WORLDWIDE COURT REPORTERS, INC. 23 3000 Weslayan Suite 235 2.4 Houston, Texas 77027 (713) 572-2000 25

1	FURTHER CERTIFICATION UNDER RULE 203 TRCP
2	The original deposition was/was not returned to the
3	deposition officer on;
4	If returned, the attached Changes and Signature
5	page contains any changes and the reasons therefor;
6	If returned, the original deposition was delivered
7	to Mr. William J. Maiberger, Jr., Custodial Attorney;
8	That \$ is the deposition officer's
9	charges to the Plaintiff for preparing the original
10	deposition transcript and any copies of exhibits;
11	That the deposition was delivered in accordance
12	with Rule 203.3, and that a copy of this certificate was
13	served on all parties shown herein on and filed with the
14	Clerk.
15	Certified to by me this day of
16	, 2014.
17	
18	
19	- Expanie Cox
	STEFANIE COX, Texas CSR 5384
20	Expiration Date: 12/31/15
21	Firm Registration No. 235
	WORLDWIDE COURT REPORTERS, INC.
22	3000 Weslayan
	Suite 235
23	Houston, Texas 77027
	(713) 572-2000
24	
25	

AETNA 151 FARMINGTON AVENUE HARTFORD CT 06156

PAGE 9 EDI Batch # 00912552

TEXAS HEALTH SYSTEM PO BOX 910115 DALLAS TX 75391-0115

Payer ID: 1066033492 Provider ID: 443912050 Adjudication Cycle End Date: 08/13/2009 DRG CODE

Check Date: 08/19/2009
Tax Identification Number: Check Number: 809225500001495
Check Amount: \$2058.13
Payment Method: ACH
Payment Format Code: CCP
Receiver ID Number: 330890223

ACCOUNT NO: PATIENT: CLAIM ID:

PROVIDER: MEMBER ID:

443912050

DATE RECEIVED: 07/08/2009 CLAIM STATUS CODE: Processed as Primary PRODUCT TYPE: POS CLAIM ADJ CODES:

SER DA 07/02/ 07/02/		PROC MOD 80048 85027	BILLED AMOUNT 211.75 95.50	DENIED NO AMOUNT 0.00 0.00	AMOUNT 0.00 0.00	AMOUNT 0.00 0.00	AMOUNT 34.41 0.00	CONT ADU AMOUNT 39.69 95.50	OTHER ADJ AMOUNT 0.00 0.00	PAID REMARK 137.65 CO45 0.00 CO45	PR2
	CLA	AIM TOTALS:	307.25	0.00	0.00	0.00	34.41	135.19	0.00	137.65	

REMARK CODE DESCRIPTIONS:

 ${\tt CO45}$ - U&C-Charges exceed your contracted/legislated fee arrangement. PR2 - Coinsurance Amount

The contents of this page may have been modified to include additional information required for electronic filing of this document.

EXHIBIT

AETNA 151 FARMINGTON AVENUE HARTFORD CT 06156

PAGE 8 EDI Batch # 00912552

TEXAS HEALTH SYSTEM PO BOX 910115 DALLAS TX 75391-0115

Payer ID: 1066033492 Provider ID: 443912050 Adjudication Cycle End Date: 08/13/2009 DRG CODE

Check Date: 08/19/2009
Tax Identification Number: Check Number: 809225500001495
Check Amount: \$92058.13
Payment Method: ACH
Payment Format Code: CCP
Receiver ID Number: 330890223

PROVIDER: MEMBER ID:

443912050

DATE RECEIVED: 07/08/2009
CLAIM STATUS CODE: Processed as Primary
PRODUCT TYPE: POS
CLAIM ADJ CODES:

SER DATE POS 07/02/09 13	DROC MOD J0690 Q0179 J7120 J3010 J2765 J2405 J2270 47562 0250 0272 0272 0270 0370 0370 03710 36415 93005 88304 82962 80076	BILLED AMOUNT 21.65 1.00 142.80 22.30 7.80 69.00 3598.50 330.21 539.00 1413.75 978.75 13.00 244.75 90.25 45.50 307.75	DENIED NO AMOUNT 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	AMOUNT 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	DED/COPAY AMOUNT 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	COINS AMOUNT 2.42 0.11 15.99 2.50 0.87 7.73 1.01 403.03 36.98 60.37 17.47 158.34 109.62 0.00 27.41 10.11 5.10 34.47	CONT ADJ AMOUNT 9.53 0.44 62.83 9.81 3.43 30.36 1583,34 145.29 237.16 68.64 622.05 43.00 107.69 39.71 20.02 135.41	OTHER ADJ AMOUNT 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	PAID REMAR 9.70 CO45 0.45 CO45 63.98 CO45 9.99 CO45 3.50 CO45 30.91 CO45 4.03 CO45 147.94 CO45 147.94 CO45 69.89 CO45 633.36 CO45 438.48 CO45 0.00 CO97 109.65 CO45 40.43 CO45 20.38 CO45 137.87 CO45	K PR2 PR2 PR2 PR2 PR2 PR2 PR2 PR2 PR2 PR2
CLA	AIM TOTALS:	7991.01	0.00	0.00	0.00	893.53	3523.32	0.00	3574.16	

REMARK CODE DESCRIPTIONS:

 ${\tt CO45}$ - U&C-Charges exceed your contracted/legislated fee arrangement. PR2 - Coinsurance Amount CO97 - INCL-Payment is included in the allowance for the basic service/procedure.

The contents of this page may have been modified to include additional information required for electronic filing of this document.

Case 3:1/1-cv-003/17-M Document 62 Filed 12/22/1/ Page 21 of 25 PageID 8154

AETNA 151 FARMINGTON AVENUE HARTFORD CT 06156

PAGE EDI Batch # 253 01072738

TEXAS HEALTH HARRIS METHODIST H PO BOX 421837 HOUSTON TX 77242-1837

Payer ID: 1066033492 Provider ID: 699129380 Adjudication Cycle End Date: 04/16/2012 DRG CODE

Check Date: 04/20/2012
Tax Identification Number: Check Number: 812107520000846
Check Amount: \$464986.01
Payment Method: ACH
Payment Format Code: CCP
Receiver ID Number: 77458

PROVIDER: MEMBER ID:

699129380

DATE RECEIVED: 02/07/2012 CLAIM STATUS CODE: Processed as Primary PRODUCT TYPE: POS CLAIM ADJ CODES:

SER DATE 11/03/11 11/05/11 11/05/11 11/05/11	11 11 11 11	PROC MOD 0111 0200 0636 0360	BILLED AMOUNT 2320.00 2980.00 1232.34 9664.50	AMOUNT 2320.00 0.00 0.00 0.00	NONCOVERED AMOUNT 0.00 0.00 0.00 0.00	DED/COPAY AMOUNT 0.00 0.00 0.00 0.00	COINS AMOUNT 0.00 2043.33 0.00 0.00	CONT ADJ AMOUNT 0.00 -18668.27 1232.34 9664.50	OTHER ADJ AMOUNT 0.00 0.00 0.00 0.00	PAID REMAR 0.00 COB8 19604.94 CO94 0.00 CO45 0.00 CO45	K PR119 PR2
11/05/11 11/05/11 11/05/11 11/05/11 11/05/11	11 11 11	0278 0250 0420 0258 0272	1490.00 924.46 218.50 200.00 192.25	0.00 924.45 0.00 0.00 207.25	0.00 0.01 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	1490.00 0.00 218.50 200.00 -15.00	0.00 0.00 0.00 0.00 0.00	0.00 CO45 0.00 PR119 0.00 CO45 0.00 CO45 0.00 CO94	
11/05/11 11/05/11 11/05/11 11/05/11 11/05/11	11 11 11 11	0270 0637 0351 0370 0430	151.00 2.00 1773.75 2395.25 276.50	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	151.00 2.00 1773.75 2395.25 276.50	0.00 0.00 0.00 0.00	0.00 CO45 0.00 CO45 0.00 CO45 0.00 CO45	PR119
11/05/11 11/05/11 11/05/11 11/05/11	11 11 11	0300 0611 0730 0320	15.25 2158.00 283.25 366.50	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	15.25 2158.00 283.25 366.50	0.00 0.00 0.00 0.00 0.00	0.00 CO45 0.00 CO45 0.00 CO45 0.00 CO45 0.00 CO45	
	CLATM	TOTALS:	26643.55	3451.70	0.01	0.00	2043.33	1543.57	0.00	19604.94	

REMARK CODE DESCRIPTIONS:

COB8 - Claim/service not covered/reduced because alternative services were available, a PR119 - OTHERA-Benefit maximum for this time period has been reached. CO94 - OTHERA-Processed in excess of charges. PR2 - Coinsurance Amount CO45 - U&C-Charges exceed your contracted/legislated fee arrangement. PR96 - NCOVA-NON COVERED CHARGES

Page 22 of 25 PageID 8155

AETNA 151 FARMINGTON AVENUE HARTFORD CT 06156

PAGE EDI Batch # 16 01064842

TEXAS HEALTH HARRIS METHODIST H PO BOX 916063 FORT WORTH TX 76191-6063

Payer ID: 1066033492 Provider ID: 699129380 Adjudication Cycle End Date: 03/01/2012 DRG CODE

Check Date: 03/07/2012
Tax Identification Number: Check Number: 812061490003318
Check Amount: \$208095.51
Payment Method: ACH
Payment Format Code: CCP
Receiver ID Number: 77458

PROVIDER: MEMBER ID:

699129380

DATE RECEIVED: 02/07/2012 CLAIM STATUS CODE: Processed as Primary PRODUCT TYPE: POS CLAIM ADJ CODES:

SER DATE POS PROC MOD 11/05/11 11 0307 11/05/11 11 0301 11/05/11 11 0302 11/05/11 11 0305 11/05/11 11 0306	BILLED AMOUNT 99.25 906.75 114.00 610.25 821.50	DENIED AMOUNT 99.25 906.75 114.00 610.25 821.50	NONCOVERED AMOUNT 0.00 0.00 0.00 0.00	DED/COPAY AMOUNT 0.00 0.00 0.00 0.00	COINS AMOUNT 0.00 0.00 0.00 0.00	CONT ADJ AMOUNT 0.00 0.00 0.00 0.00 0.00	OTHER ADJ AMOUNT 0.00 0.00 0.00 0.00 0.00	PAID REMARK 0.00 PI18 0.00 PI18 0.00 PI18 0.00 PI18 0.00 PI18
CLAIM TOTALS: PAT RESP: 0.00	2551.75	2551.75	0.00	0.00	0.00	0.00	0.00	0.00

REMARK CODE DESCRIPTIONS:

PI18 - Duplicate claim/service.

The contents of this page may have been modified to include additional information required for electronic filing of this document.

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AETNA 151 FARMINGTON AVENUE HARTFORD CT 06156

PAGE EDI Batch # 9 00926222

TEXAS HEALTH SYSTEM PO BOX 910115 DALLAS TX 75391-0115

Payer ID: 1066033492 Provider ID: 443912050 Adjudication Cycle End Date: 10/22/2009 DRG CODE

Check Date: 10/28/2009
Tax Identification Number: Check Number: 809295450001411
Check Amount: \$40523.81
Payment Method: ACH
Payment Format Code: CCP
Receiver ID Number: 330890223

PROVIDER: MEMBER ID:

443912050

DATE RECEIVED: 10/06/2009 CLAIM STATUS CODE: Processed as Primary PRODUCT TYPE: POS CLAIM ADJ CODES:

SER DATE 08/26/09		PROC 0111	MOD	BILLED AMOUNT 7693.00	DENIED AMOUNT 33146.40	NONCOVERED AMOUNT 0.00	DED/COPAY AMOUNT 0.00	AMOUNT 0.00	CONT ADU AMOUNT -26153.40	OTHER ADJ AMOUNT 0.00	PAID REMARK 0.00 CO45 CO94
08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09 08/28/09	11 11 11 11 11 11 11 11	0209 0250 0250 0252 0360 0370 0390 0460 0636 0637 0710 0306 0309 0320 0410 0420		2575.00 5797.83 4509.50 24239.25 52742.40 396.00 1867.18 40.00 978.75 2041.75 1833.00 2817.75 1575.50	2575.00 5797.83 18.00 24239.25 5274.25 5274.25 396.00 1867.18 40.00 978.75 755.25 2041.75 1833.00 281.75 1575.50	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 4509.50 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 PI18 0.00 PI18 0.00 PI18 0.00 CO45 0.00 PI18 0.00 PI18
	CLA	IM TOTA	LS:	61124.01	82067.91	0.00	0.00	0.00	-21643.90	0.00	0.00

REMARK CODE DESCRIPTIONS:

The contents of this page may have been modified to include additional

CO45 - U&C-Charges exceed your contracted/legislated fee arrangement.
CO94 - OTHERA-Processed in excess of charges.
PI18 - Duplicate claim/service.
PR150 - Payment adjusted because the payer deems the information submitted does not suppo

CAUSE NO. 17-269305-13

TEXAS HEALTH RESOURCES,	§ 8	IN THE DISTRICT	COURT	OF	
Plaintiff,	8 8 8				
VS.	§ §				
AETNA HEALTH INC.,	§ §	TARRANT COUNT	ΓY, TEXA	AS	
Defendant.	§ 8				
ZVIVIIGHIM	§ §	17th JUDICIAL DI	STRICT	21	
			DS S	2013 D	TARR
		EALTH INC.'S	TAS A	EC 13	RAN
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Defendant Aetna Health Inc. files this Original Answer in response to Plaintiff's Original Petition filed by Texas Health Resources.

Defendant asserts a general denial as authorized by Rule 92 of the Texas Rules of Civil Procedure, reserving the right to amend its pleadings subsequently to present its special exceptions to the Plaintiff's Original Petition, its affirmative defenses, special denials, other pleas and defenses, and its own claims.

WHEREFORE, PREMISES CONSIDERED, Defendant prays that upon final hearing the Court enter judgment that Plaintiff take nothing and that Defendant be awarded its costs of court and such other and further relief to which it may be justly entitled.

EXHIBIT

D

Respectfully submitted,

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ATTORNEYS FOR DEFENDANT **AETNA HEALTH INC.**

CERTIFICATE OF SERVICE

This document has been sent by United States mail, certified, return receipt requested, and via email on December 13, 2013, to the following counsel of record:

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